



C OORDINATION NEWSLETTER

Fall 2003 · Volume 1 · Issue 4

What's new on the possible link between too much mercury, pregnancy, lactation and infant's overall growth and development

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Eating Fish Safely!

Environmental Health Investigations Branch, California Department of Health Services; 510-622-4500

Eating fish provides many nutritional and health benefits. Fish provides high quality protein and essential fatty acids (omega-3 fatty acids) that are associated with promoting cardiovascular health and healthy nervous system development. However, some fish may contain chemicals at levels that pose health concerns. Chemicals that are commonly found in fish include mercury, polychlorinated biphenyls (PCBs), and organochlorine pesticides such as DDTs (which include DDT and its breakdown products DDE and DDD).

Mercury poses health concerns for fetuses, infants, and children because it can adversely affect development of the brain and the nervous system. It can build up in the body and be passed on to the

developing fetus during pregnancy and to nursing infants through breast milk. Thus, it is advisable to reduce mercury exposure among women who may become pregnant, pregnant and nursing women, infants, and children through adolescence.

Too much mercury can also affect the nervous system in adults. Mild symptoms can include loss of sensation, tingling in hands and feet, tiredness, blurred vision, and memory loss.

Health effects associated with DDTs and PCBs include: cancer, liver damage, and effects on the immune, endocrine, and reproductive systems. Many effects have only been shown in animal tests, but could occur in humans.

Health risks may also be higher for infants and young children. During pregnancy and lactation, mothers can pass DDTs and PCBs on to their infants.



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Co-Sleeping With Your Baby

Ben Carranco, Health Program Specialist, MCH Branch

Over the past couple of years, co-sleeping with a baby has been one of the most highly debated issues pertaining to infant safety. There are those who claim co-sleeping to be protective since the mother is right there and her natural maternal instincts will intervene if the baby is in harm's way. Many also

believe that co-sleeping strongly increases the probability of the mother breastfeeding her baby because of the convenience of having the child in the same bed. The arguments against co-sleeping are that an adult bed is dangerous for an infant since there are no guard rails to prevent the child from rolling off the

bed. Adults may roll over onto the infant and cause bodily harm or even suffocate the baby. Finally, adult pillows and heavier blankets are unsafe for infants due to the increased risk of suffocation.

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CONGRADULATIONS Mary Ontiveros, R.N., PHN

Mary Ontiveros was the recipient of the Women of Distinction-Health award given out by the Soroptimist International of Visalia. The awards are given out annually to those who have made a difference in the lives of others. In receiving the award, Mary was lauded for helping to get a breast cancer screening clinic started in 2002 in North Visalia, an area of the community sorely in need of access to medial services. Mary has also worked on numerous health-related committees, including the Tulare-Kings Nursing Leadership Council and the Tulare County Child Care Abuse Coordinating Council. She is also a board member of ImagineU Children's Museum.

Blue Cross of California honored Mary with its first Community Hero Award. Mary, a registered nurse and division manager for Public Health with the Tulare County Health and Human Services Agency, was nominated for her outstanding service in Public Health.

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Eating Fish Safely!

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These chemicals can then affect overall growth and development, and brain development and function.

To help women and their families gain health benefits of eating fish and reduce exposures to mercury, the US Food and Drug Administration (USFDA) has issued advice about fish purchased from stores and restaurants and the US Environmental Protection Agency (USEPA) has issued advice for self-caught fish. It is advisable for women who are planning to become pregnant to follow the recommendations one year before becoming pregnant, if possible. This gives the body time to get rid of mercury from fish already eaten. These recommendations are summarized in the following table:

Safety Guidelines for Eating Fish for Pregnant and Breastfeeding Women, Women Who Might Become Pregnant, and Young Children

- **DO NOT EAT** shark, swordfish, tilefish, or king mackerel because of high mercury levels in these fish.

Pregnant and Breastfeeding Women and Women Who Might Become Pregnant

Fish You Buy In A Store Or Restaurant

You can eat up to 1 pound (weight before cooking) per week of fish and shellfish bought in stores or restaurants.

1 pound of uncooked fish is the same as 12 ounces of cooked fish. Canned tuna can be eaten as part of the 12 ounces of cooked fish per week.

Seafood that have little or no mercury include store-bought catfish, salmon, shrimp, and scallops.

Fish Caught by Friends or Family

Follow health advisories for areas where fish were caught. If there are no health advisories, you can eat:

- up to ½ pound (weight before cooking) per week of fish caught in lakes, rivers, reservoirs, or streams (fresh water)

OR

- up to 1 pound (weight before cooking) per week of fish caught in ocean or bays (saltwater)

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Mary Ontiveros, R.N.

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Mary has worked for the Agency for the past 32 years, and has been involved in the provision of public health services for Tulare County with a special emphasis on developing programs for women, children, and families. She has developed and worked with numerous Maternal Child Health Programs, Communicable Disease and Tuberculosis Control, AIDS Preventive Health Care, Breast and Cervical Cancer Control Programs.

Mary has a bachelor of science degree in Nursing from California State University, Fresno. She and her husband, Frank, live in Exeter. They have two daughters and three grandchildren.

Eating Fish Safely!

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Children Less than 6 Years Old*Fish you Buy in a store or Restaurant*

Children less than 6 years old can eat up to 6 ounces (weight before cooking) per week of fish and shellfish from stores or restaurants

Fish Caught by Friends or Family

Children less than 6 years old can eat:

- up to 3 ounces (weight before cooking) per week of fish caught in lakes, rivers, reservoirs, or streams (fresh water)

OR

- up to 6 ounces (weight before cooking) per week of fish caught in the ocean or bays (salt water)

You can eat fish from different places, but stick to the lowest recommended amounts; don't add limits. For example, a pregnant woman can eat one six ounce can of tuna and also 8 ounces of salmon purchased from a store or restaurant during the same week, thus staying within the recommended limit of one pound of fish from stores or restaurants. She should not eat any other fish the same week, however. The following week, if she eats half a pound of trout caught from a river or reservoir where there is no local advisory, she should **NOT** eat any other fish the same week.

Additional tips for making fish safer to eat:

- Mercury gets into the flesh of the fish, so eat within recommended amounts. It can't be cut away, cleaned, or cooked out.
- Eat different kinds of fish.
- Eat smaller fish because they generally have less mercury than older, larger fish.
- Throw away fatty parts of fish like the skin, guts, belly flap because chemicals like PCBs and pesticides build up in these parts. Also, bake, broil, grill or steam fish in a way that allows the fat to drip away.

The Environmental Health Investigations Branch has developed a brochure entitled **Mercury in Fish** containing the above recommendations. A copy of the brochure can be downloaded at its website listed below. For more information about fish contamination, contact:

- your local health department,
- Environmental Health Investigations Branch, CA Dept of Health Services at 510-622-4500 <http://www.dhs.ca.gov/ps/deodc/ehib/index.htm>, OR
- Office of Environmental Health Hazard Assessment, CalEPA at 916-327-7319 or 510-622-3170; <http://www.oehha.ca.gov/fish.html>

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Co-Sleeping With Your Baby

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Both arguments have valid points, and parents must weigh both sides of the argument before making their decision to co-sleep with their baby. If the choice is to co-sleep, there are a few guidelines parents should follow to decrease the risk of injury to their baby:

- Parents should not be sleep deprived, under the influence of alcohol or drugs (this includes prescription and over the counter drugs which cause drowsiness), and should not smoke
- All excessive blankets, pillows and other coverings should be removed from the bed
- No other siblings, children, or pets should be in the bed with the baby
- Babies should sleep on their backs
- Do not sleep on sofas, recliners, waterbeds, futons, or beanbags
- Do not over bundle your baby. If the temperature is comfortable for you, it is comfortable for your baby

Although it is easy to simply advocate against co-sleeping, health professionals must also recognize cultural differences and the importance of maternal and family bonding. Following these guidelines will help parents create a safe sleeping environment if they choose to sleep with their baby.

MARK YOUR CALENDAR**CPSP Training
Calendar**Steps to Take

2 Day Provider Training
Dates: October 21, 22, 2003
Time: 8am-4pm
Location: Hilton Ontario Airport
700 North Haven Avenue
Ontario, CA 91764

Annual PSC Meeting

November 13, 2003
Sacramento Convention Center,
room 315
Sacramento, CA
9am-4:30pm

New PSC Training

Date: January 13 & 14, 2004
Department of Health Services/MCH
1615 Capitol Avenue
Sacramento, CA

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Provider Profile: Grossmont Hospital Prenatal Clinic

Grossmont Hospital Prenatal Clinic, located in La Mesa California was the recipient of the CPSP Best Practice Award for 2002/03 by the Perinatal Care Network in San Diego County. This clinic's staff of 5 CNM's, 1 NP, 6 Perinatologists, 2 ultrasonographers, an LCSW, a Teen Pregnancy Coordinator, a Childbirth Educator, an RN, an LVN, 3 Registered Dieticians, a Physical Therapist, a Healthcare Partner (MA), a Receptionist and an Office Coordinator, provides a comprehensive array of services delivering over 3200 babies last year.

"We are a great team", states Patty Hendrix, Office Coordinator, who work together for optimal client care in one location facilitating the needs of our patients' transportation issues. Easy access to trolley and bus lines also plays a role in the patient show rate. Weekly high-risk management meetings take place to ensure all patients are managed appropriately. The ability to tap into services such as the

Perinatal Care Network, WIC, and Partnership for Smoke-free Families are but a few resources we regularly utilize to assist our mom's to be. Our Patient Relations department provides us with Taxi vouchers, tokens for the bus and/or trolley, and free meal tickets for our cafeteria to be handed out for those "unique circumstances."

Having served in our community as CPSP providers for twelve years has given us the ability to grow along with our community and meet their needs. Many of our repeat patients remember when we started as a two-man team. Due to our success we have been able to increase our team of professionals dramatically.

In 1991 we had approximately 60 prenatal clinic patients deliver compared to the 270 in the year 2001. This past month we had 165 prenatal clinic clients.

What makes our team proud is that each and every one of our team members believes in providing our patients not only the best medical attention but also the assistance they need whether it's finding them a battered women's shelter to go to, assistance with obtaining clothing, car seats, giving them the time to express their fears, hardships, or ailments. We take great pride in being diverse and sensitive to our clients cultures. Ensuring that we respect a teen or a pre-menopausal client is part of our daily goal.

The antepartum client is offered classes on Nutrition, Fetal Development, Labor & Delivery, Breastfeeding, Hospital Policy & Procedure, and Baby Care Basics. We also offer the La Maze series to accommodate clients and their coaches with evening classes. Our physical therapist recently incorporated a Back Wellness Class providing preventive care measures to our patients.

We recently purchased a post-partum depression tool kit enabling our team to improve post-partum depression assessments. This tool enables us to optimize safety of our new moms, infants and family. Post-partum patients are also encouraged to attend the Breastfeeding Support Group where infants are weighed and the group discusses breastfeeding issues. All first-time moms are referred to the public health nurse.

Please join me in congratulating Grossmont Hospital Prenatal clinic on this award and in wishing them continued success.

This article was developed in collaboration with Patty Hendrix, Office Coordinator and Cindy Fessier, PSC, San Diego County.



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COORDINATION NEWSLETTER - The Comprehensive Perinatal Services Program (CPSP)

Medi-Cal Questions File

By Jeanne Machado-Derdowski, DHS Medical Research Analyst

QUESTION: Please define an FQHC "visit" as it pertains to the CPSP.

ANSWER: As stated above, for FQHCs and RHCs, a visit is a face-to-face encounter between a clinic or center patient and a physician, physician assistant, nurse practitioner, certified nurse midwife, specialized nurse practitioner, or visiting nurse (in certain circumstances), a licensed clinical psychologist or clinical social worker. FQHCs/RHCs, which are CPSP providers, may also bill a visit where the patient has had a face-to-face encounter with a Social Worker, RN, Dietitian, Health Educator, Childbirth Educator, Licensed Vocational Nurse, or Comprehensive Perinatal Health Worker, as provided for in Title 22, California Code of Regulations Section 51179.7. **The federal Centers for Medicare and Medicaid** states that CPSP services must be provided by a physician or be under the "personal supervision" of a physician.

QUESTION: Define "personal supervision".

ANSWER: Title 22, California Code of Regulations section 51179.5 states "personal supervision" means evaluation, in accordance with protocols, by a licensed physician, of services performed by others through direct communication, either in person or through electronic means.

Website Resources

Dept. Of Health Services— Maternal Child Health Branch: www.mch.dhs.ca.gov

Mt San Antonio College www.mtsac.edu

CPSP www.mch.dhs.ca.gov/programs/cpsp

Los Angeles County Public Health www.lapublichealth.org/mch

March of Dimes www.marchofdimes.com

Medi-Cal Policy Division www.medi-cal.ca.gov

Environmental Health Investigations Branch www.dhs.ca.gov/ps/doedc/ehib/index.htm